PTO/SBIOS (08-03)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 Application or Dooket Number										wper
CLAIMS AS FILED - PART I (Column 1) (Column 2)							ИПТҮ	OR		R THAN ENTITY
FOR NUM			ER FILEO NUMBE		R EXTRA	RATE	FEE		RATE	FEE
	C FEE :FR 1.16(a))	•	•				\$	OR		8
TOTAL CLAIMS (37 CFR 1.18(c))			minus 20 = *		•	x s		OR	X 5=	
INDEPENDENT CLAIMS (37 CFR 1.18(b))		s	minus 3 =			X \$=		OR	x s •	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))					+: :		OR	+5 =		
"If the difference in column 1 is tess than zero, enter "O" in column 2.						TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II										
						01414		OR	OTHER	
	1	(Column 1)	Г Т	HIGHEST	<u> </u>	SMALL	I	1	SMALL	EMITY
NT A	7/6/67	REMAINING AFTER AMENDMENT	ĺ.	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	ŖATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total :	• 1	Minus	" Z()	•—	x :		OR	x 3	
	independent (SF CFR 1.18(b))	. /	Minus	" 3	•	x		OR	xs_C.	
AM	FIRST PRESENT	ATION OF MULTIPL	E DEPENDE	NT CLAIM (37 CF	R 1,16(d)	,,	Ť	OR	+3	
/ /						TOTAL ADD'L FEE		OR	TOTAL	
7/23 (Column 1) (Column 2) (Column 3)							•	•		
8		CLAIMS		HIGHEST	PRESENT	2115	4001		\\	Z
	.,	REMAINING AFTER,		NUMBER PREVIOUSLY	EXTRA	RATE	ADDI- TIONAL	·	KATE	ADDI- TIONAL
ENDMENT	Total	AMENDMENT	Minus	PAID FOR	50	x	FEE		_\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	FEE
	(37 CFR 1.18(t)) . Independent (37 CFR 1.16(h))	•	Minus	<u> </u>	5			OR ;	$\vdash X$	
AME						× 3		OR	× • • • • • • • • • • • • • • • • • •	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						TOTAL		OR	TOTAL	
1000						ADD'L FEE	<u>L</u>	9	ADD'L FEE	
\square	KUE_	(Cotumn 1)		(Column 2)	(Column 3)		,	/		
ENDMENTC	9-4-01	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total	AMENDMENT 7	Minus	" 2.()	- 70	X \$ \$	· FEE		X \$=	FEE 1
2	(3J CFR 1,16(c)) Independent (3J CFR 1,16(b))		Minus		1 × 5			OR		0
AME.						X 3	 	OR	× 5	0.
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))						· TOTAL		OR	TOTAL	0.
ADD'L FEE OR ADD'L FEE										
* If the entry in column 1 is less than the entry in column 2, write "O' in column 3. ** If the "Highest Number Previously Paid For" B4 THIS SPACE is less than 20, enter "20" *** If the "Highest Humber Previously Paid For" B4 THIS SPACE is tess than 3, enter "3"										

The "Highest Number Previously Paid For If 11HIS SPACE is test start at a sense 13. The "Highest Number Previously Paid For If (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U S C 122 and 37 CFR 1.14. This collection is estimated to take 12 information form to produce a publication of the USPTO. Time vide vary depending upon the individual case. Any comments on the amount of time you require to complete this form andors suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Potent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SETIO FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.